PATENT A	APPLICATION	FEE	DETE	AMINA	MOIT	RECC)RD
	Effective	e Oct	ober 1	, 2001			

Application or Docket Number

2080-1070-RAZ

(Column 1) (Column 2)						SMALL ENTITY TYPE			OR SMALL ENTITY			
TOTAL CLAIMS		20				ſ	RATE	FEE] [RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		20 minus 20= *		* .	* A		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 mir	minus 3 = *		4		X42=	۲	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						į	TOTAL	370	OR	TOTAL	<u>} </u>	
CLAIMS AS AMENDED - PART II							OTHEF				THAN	
		(Column 1)			mn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A	\$ 2 # 5 2	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIRA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
							į.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	· · · · · ·
		(Column 1)		(Colu	mn 2)	(Column 3)	_			-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	TCLAIM			+140=		OR	+280=	
							Į	TOTAL		1 1	TOTAL ADDIT. FEE	
							A	ADDIT. FEE l		JUN	ADDIT. FEE	
_		(Column 1) CLAIMS	1	(Colu	mn 2) HEST	(Column 3)) [i i		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	.X\$18=	
AMER	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		!				.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												